'se side?	SENDER:  Complete items 1 and/or 2 for additional services.  Complete items 3, 4a, and 4b.  Print your name and address on the reverse of this form so that we can return this card to you.		I also wish to receive the following services (for an extra fee):	-
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	Sunny side WA 98944	7. Date of De		u fc
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your	6. Signature: (Addressee or Agent)			
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-	PS Form 38-11, December 1994		Domestic Return Receipt	

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided) 6139 6139 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS. FOLD AT DOTTED LINE 2105 2105 Postage Certified Fee Postmark Here 0023 Return Receipt Fee (Endorsement Required) 0023 Restricted Delivery Fee (Endorsement Required) 7000 0520 Total Postage & Fees

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TRECIPIENT'S Name (Please Print Clearly) (To be completed by maller)

Suny Side Valley Irving, Dist., Jim Tru

Street, Apt. No.; or PO Box No. 2000 City, State, ZIP+ 4 See Reverse for Instructions PS Form 3800, February 2000



### STATE OF WASHINGTON

### DEPARTMENT OF ECOLOGY

15 West Yakima Avenue, Suite 200 • Yakima, Washington 98902-3452 • (509) 575-2490

May 7, 2001

**CERTIFIED MAIL** 

Jim Trull, Secretary-Manager Sunnyside Division C/o Sunnyside Valley Irrigation District PO Box 239 Sunnyside WA 98944

RE: Roza Sunnyside Board of Joint Control Emergency Change Applications Under Court Claim No. 1752, Cause No. 77-2-01484-5

Enclosed please find a copy of the Department of Ecology's Emergency Drought Change Authorizations. This report constitutes our determination and order regarding the above-referenced application for change. If you have any questions or concerns about any of this information, please call Carol Mortensen of the Department of Ecology at (509) 575-2597.

This Order may be appealed pursuant to RCW Chapter 43.21B. The person to whom this Order is issued must file an appeal with the Pollution Control Hearings Board within thirty (30) days of receipt of this Order. Send the appeal to: Pollution Control Hearings Board, P.O. Box 40903, Olympia, Washington 98504-0903. At the same time, a copy of the appeal must be sent to: Department of Ecology, Fiscal Office, P.O. Box 47615, Olympia, Washington 98504-7615. All others receiving notice of this Order must file an appeal with the Pollution Control Hearings Board within thirty (30) days of the date the Order was mailed in the same manner described above.

Sincerely

Robert F. Barwin, Section Manager

Water Resources Program

RFB:gg 010504a

Enclosures: Emergency Drought Change Authorization

cc: Ron Van Gudy, Mgr. Roza Irrigation District

I also wish to receive the SENDER: Complete items 1 and/or 2 for additional services.

Complete items 3, 4a, and 4b.

Print your name and address on the reverse of this form so that we can return this card to you.

Attach this form to the front of the mailpiece, or on the back if space does not permit following services (for an extra fee): Thank you for using Return Receipt Service. on the reverse 1. Addressee's Address ■ Attach this form to the iroll of the imaginery permit.
■ Write "Return Receipt Requested" on the mailpiece below the article number.
■ Write "Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

4a. Article 2. Restricted Delivery Consult postmaster for fee. 4a. Article Number RETURN ADDRESS completed 0374 Ron Van Gudy, Mgr. 4b. Service Type Roza Irrigation District Certified Insured □ Registered ☐ Express Mail Is vour RETURN APABEES ☐ Return Receipt for Merchandise ☐ COD Sunnyside WA 98944 7. Date of Delivery MAY - 9 2001 8. Addressee's Address (Only if requested 5. Received By: (Print Name) and fee is paid) 6. Signature: (Addressee or Agent) Domestic Return Receipt PS Form 3811, December 1994

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS. 3937 **3937 HZE9 HZE9** Postage Certified Fee 1 0022 0022 6 Postmark Return Receipt Fee (Endorsement Required) Here Restricted Delivery Fee (Endorsement Required) 0550 **Total Postage & Fees** 520 Recipient's Name (Please Print Clearly) (To be completed by maller) ROZA Irrigation Street, Apt. No.; or PO Box No. Irrigation District 2000 7000 City, State, ZIP+ 4 PS Form 3800, February 2000



### STATE OF WASHINGTON

# DEPARTMENT OF ECOLOGY

15 West Yakima Avenue, Suite 200 • Yakima, Washington 98902-3452 • (509) 575-2490

May 7, 2001

Ron Van Gudy, Manager Roza Irrigation District PO Box 810 Sunnyside WA 98944

RE: Emergency Drought Change Authorization re: Roza Sunnyside Board of Joint Control (Court Claim No. 1752; Cause No. 77-2-01484-5)

Enclosed is a copy of the Department of Ecology's Report, which constitutes our determination and order regarding the above-referenced application. If you have any questions or concerns about any of this information, please call Carol Mortensen of the Department of Ecology at (509) 575-2597.

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Sincerely

Robert F. Barwin, Section Manager

Water Resources Program

RFB:gg 010504d

Enclosures: Findings of Fact and Decision

f-loth.doc



### STATE OF WASHINGTON

## DEPARTMENT OF ECOLOGY

15 West Yakima Avenue, Suite 200 • Yakima, Washington 98902-3452 • (509) 575-2490

May 7, 2001

To:

Carroll Palmer, Yakama Nation

RE:

Emergency Drought Change Authorization re: Roza Sunnyside Board of Joint

Control (Court Claim No. 1752; Cause No. 77-2-01484-5)

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Sincerely

Robert F. Barwin, Section Manager

Water Resources Program

RFB:gg 010504b

Enclosures: Findings of Fact and Decision

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